

BASIC INFORMATION

DESCRIPTION

Infertility is described as an inability to achieve pregnancy after 1 year of sexual activity without contraception. Infertility occurs in 10 to 15% of all couples. Fertility depends on the production of normal quantities of healthy sperm, ability to achieve an erection and ejaculation of sperm into the vagina during sexual intercourse. About 30 to 40% of infertility causes can be attributed to male partners.

FREQUENT SIGNS AND SYMPTOMS

Failure to impregnate a fertile woman.

CAUSES

- Anatomical abnormalities of the penis or testicles, including undescended testicles.
- Excessive alcohol intake.
- · Urinary-tract infection.
- · Hormone disturbance.
- · Endocrine disorders.
- Severe chronic or metabolic disorders (such as uremia or cirrhosis).
- · Mumps.
- Use of some drugs, such as antihypertensives, cytotoxic drugs, male hormones and MAO inhibitors.
- Sexually transmitted disease, especially syphilis and nonspecific urethritis that causes scarring.
- · Injury to the genitals.
- · Varicose veins in the testicles (varicocele).
- Psychological reasons, such as fear of infertility.
- Overheating of the testicles caused by vigorous, repetitive exercise or underwear that is too tight and holds the testicles too close to the body (possible).
- Intercourse problems, e.g., premature withdrawal, poor timing with menses, too infrequent.
- Ejaculatory dysfunction.
- · Exposure to insecticides or industrial chemicals.

RISK INCREASES WITH

- · Diabetes mellitus.
- Poor nutrition and poor general health.
- Smoking.

PREVENTIVE MEASURES

Any specific preventive measures depend on the cause.

EXPECTED OUTCOME

Some fertility problems are minor and reversible. Often, no clear cause for infertility is found. Approach treatment with optimism.

POSSIBLE COMPLICATIONS

Psychological distress caused by feelings of guilt, inadequacy, and loss of self-esteem.



TREATMENT

GENERAL MEASURES

- Laboratory studies, such as blood studies of hormones and semen analysis (to determine quality, quantity, form, and motility).
- Surgical diagnostic procedures such as testicular biopsy.
- Special tests of sperm function and quality are available at major infertility centers.
- Psychotherapy or counseling for sexual therapy techniques, marital problems or alcoholism.
- Surgery to correct anatomical abnormalities of the reproductive system, e.g., varicocelectomy (surgery for varicocele).
- Heat may decrease sperm production in the testicles. To prevent this: Don't wear tight underwear or athletic supporters that hold the testicles too close to the body, don't take hot baths, avoid long bicycle rides.
- Have sexual intercourse during the time your partner is ovulating. Don't ejaculate for 3 days prior to intercourse. Intercourse should occur every 36 hours during the fertile period.
- Consider other methods for initiating a pregnancy: artificial insemination of washed concentrated sperm; donor insemination if no remedy is presently available; intracytoplasmic sperm injection (ICSI) whereby a single sperm is injected into a single egg and the resulting zygote is transferred to the uterus.
- Additional information available from the Fertility Research Foundation, 1430 Second Avenue, Suite 103, New York, NY 10021, (212) 744-5500 or American Fertility Society, 1209 Montgomery Hwy., Birmingham, AL 35216-2809, (205) 978-5000.

MEDICATION

Medication may be prescribed depending on the cause of infertility.

ACTIVITY

Work and exercise moderately. Overexercising can be a factor in infertility. Rest when you tire.

DIET

Eat a normal, well-balanced diet. Increased intake of zinc, vitamin C and vitamin E is sometimes recommended.



NOTIFY OUR OFFICE IF

- You or a family member has symptoms of infertility and wants help.
- Conception doesn't occur within 6 months, despite recommendations and treatment.